CITY OF AT YOUR SERVICE

Planning/Permit Application Center City Hall 555 Liberty St. SE, Room 320 Salem OR 97301-3513 503-588-6213 planning@cityofsalem.net

If you need the following translated in Spanish, please call 503-588-6256. Si usted necesita lo siguiente traducido en español, por favor llame 503-588-6256.

Project Description

Class 1 Time Extension Class 1 Time Extension

Work site location and information

Street address of or location of subject property Size of property (acres) Tax Lot Number Neighborhood Association		1610 LANCASTER DR SE SALEM OR 97317 0.40 082W06AB09200 Southeast Mill Creek Association (SEMCA)							
					People infor	mation			
					Applicant	JORDAN SCHWEIGER	2825 FOXHAVEN DR SE SALEM OR 97306		503-375-6205 jordan.schweiger@gmail.com
					Owner	Jeff Starkey	jeffstarkey1@gmai	l.com	
Contact	JORDAN SCHWEIGER	2825 FOXHAVEN DR SE SALEM OR 97306		503-375-6205 jordan.schweiger@gmail.com					
Project info	rmation								
Site Area (Acreage)		.4							
MS4 Reporting		No							
Land Use fe	es								
Description			Amount						
Time Extensions			\$190.00						
Automation Surcharge			\$5.00						
		Total Fees	\$195.00						

Land Use Application Permit #: 23 110207 00 PLN

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Terms and Conditions

Correct information: I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Copyright release for government entities: I hereby grant permission to the City of Salem to copy, in whole or part, drawings and all other materials submitted by me, my agents, or representatives. This grant of permission extends to all copies needed for administration of the City's regulatory, administrative, and legal functions, including sharing of information with other governmental entities.

Indemnity: I, the permit applicant, shall indemnify, defend and hold harmless the City of Salem, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit.

Authorizations

- Property owners and contract purchasers are required to authorize the filing of this application and must sign below. This signed form must be uploaded with other review documents.
- If the applicant and/or property owner is a Limited Liability Company (LLC), please also provide a list of all members of the LLC with your application.
- All signatures represent that they have full legal capacity to and hereby do authorize the filing of this application and certify that the information and exhibits herewith submitted are true and correct.
- I (we) hereby grant consent to the City of Salem and its officers, agents, employees, and/or independent contractors to enter the property identified above to conduct any and all inspections that are considered appropriate by the City to process this application.

This application was electronically submitted to the City of Salem Permit Application Center by **JORDAN SCHWEIGER** (PersonID: 353025) on **May 15, 2023** at **10:21** AM.

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I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:

I (we) certify that I (we) have read, understood, and confirm all the statements listed above and throughout the application form.

Authorized Signature:	
Printed Name:Jordan Schweiger	Date: 6/1/2023 00:14 PDT
Address (include ZIP): 2825 Foxhaven Drive SE, Salem, OR 9730	06
Authorized Signature: <u>uff Startur</u>	
Printed Name:	Date: $\frac{6/2}{2023} \mid 08:36 \text{ EDT}$
Address (include ZIP): 1610 Lancaster Drive SE, Salem, OR 973	302
Authorized Signature:	
Printed Name:	Date:
Address (include ZIP):	

(For office use only)					
Received by:	Date:	Receipt Number:			